

RECEIVED
CENTRAL FAX CENTER

OCT 26 2004

PTO/SB/21 (02-04)

Approved for use through 07/31/2006. OMB 0851-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/682,159
	Filing Date	10/09/2003
	First Named Inventor	Michael A. Moran
	Art Unit	3617
	Examiner Name	Edwin L. Swinehart
	Attorney Docket Number	03-096P
Total Number of Pages in This Submission		14

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input checked="" type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks To Revoke/Withdraw Notice of Abandonment Issued by Office		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Stanley M. Miller
Signature	<i>Stanley M. Miller</i>
Date	10-26-04

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Fax 703-822-9306

Typed or printed name	Stanley M. Miller		
Signature	<i>Stanley M. Miller</i>	Date	10-26-04

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/21 (02-04)

Approved for use through 07/31/2008. OMB 0851-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/682,159	
	Filing Date	10/09/2003	
	First Named Inventor	Michael A. Moran	
	Art Unit	3617	
	Examiner Name	Edwin L. Swinehart	
Total Number of Pages in This Submission	10	Attorney Docket Number	03-096P

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or individual name	Stanley M. Miller
Signature	<i>Stanley M. Miller</i>
Date	4-23-04

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. <i>Fax 703-892-9325</i>			
Typed or printed name	Stanley M. Miller		
Signature	<i>Stanley M. Miller</i>	Date	4-23-04

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Auto-Reply Facsimile Transmission



TO: Fax Sender at 7277333163

Fax Information

Date Received:

Total Pages:

4/23/2004 11:50:10 AM [Eastern Daylight Time]
10 (including cover page)

ADVISORY: This is an automatically generated return receipt confirmation of the facsimile transmission received by the Office. Please check to make sure that the number of pages listed as received in Total Pages above matches what was intended to be sent. Applicants are advised to retain this receipt in the unlikely event that proof of this facsimile transmission is necessary. Applicants are also advised to use the certificate of facsimile transmission procedures set forth in 37 CFR 1.8(a) and (b), 37 CFR 1.6(f). Trademark Applicants, also see the Trademark Manual of Examining Procedure (TMEP) section 306 et seq.

Received
Cover
Page
=====>

84/22/2004 17:57 7277333163 DICS OR MILLER PAGE 01	
<p>Approved for use by the USPTO, U.S. Department of Commerce, Patent and Trademark Office, 400 ...</p>	
<p>TRANSMISSION FORM</p>	
<p>Applicant's Name: 10/02/139</p>	
<p>Date: 10/09/2003</p>	
<p>Fax Number: Michael A. Moran</p>	
<p>Area: 3517</p>	
<p>Examiner Name: Edwin L. Swinehart</p>	
<p>Applicant's Address: 01-0962</p>	
<p>Total Number of Pages in This Transmission: 10</p>	
<p>ENCLOSURES (Check all that apply)</p>	
<p><input type="checkbox"/> Fee Transmittal Form</p>	<p><input type="checkbox"/> Check List</p>
<p><input type="checkbox"/> For Attorney</p>	<p><input type="checkbox"/> International Payment</p>
<p><input checked="" type="checkbox"/> Acknowledgment</p>	<p><input type="checkbox"/> Fee</p>
<p><input type="checkbox"/> After Final</p>	<p><input type="checkbox"/> Section to Convert to a</p>
<p><input type="checkbox"/> After Appeal/Reconsideration</p>	<p><input type="checkbox"/> Supplemental Application</p>
<p><input type="checkbox"/> Extension of Time Request</p>	<p><input type="checkbox"/> Paper of Appeal, Reconsideration</p>
<p><input type="checkbox"/> Express Examination Request</p>	<p><input type="checkbox"/> Office of Commerce Review Address</p>
<p><input type="checkbox"/> Information Disclosure Statement</p>	<p><input type="checkbox"/> Notice of Disposition</p>
<p><input type="checkbox"/> Continued Copy of Priority Document(s)</p>	<p><input type="checkbox"/> Request for Action</p>
<p><input type="checkbox"/> Response to Missing Part of Incomplete Application</p>	<p><input type="checkbox"/> (If Number of Claims)</p>
<p><input type="checkbox"/> Response to Missing Part of Incomplete Application</p>	<p><input type="checkbox"/> Remarks</p>
<p>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</p>	
<p>Print Name: Stanley H. Miller</p>	
<p>Signature: <i>Stanley H. Miller</i></p>	
<p>Date: 4-23-04</p>	
<p>CERTIFICATE OF TRANSMISSION MAILING</p>	
<p>I hereby certify that the correspondence is being mailed as indicated to the USPTO or deposited with the United States Postal Service with sufficient postage to first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1462, Alexandria, VA 22313-1462 on the date shown below.</p>	
<p>File # 723-502-9325</p>	
<p>Type of correspondence: Stanley H. Miller</p>	
<p>Signature: <i>Stanley H. Miller</i></p>	
<p>Date: 4-23-04</p>	
<p>This statement of information is required by 37 CFR 1.6(f). The statement is to be made in the form of a letter to the USPTO or deposited with the United States Postal Service with sufficient postage to first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1462, Alexandria, VA 22313-1462 on the date shown below. The statement is to be made in the form of a letter to the USPTO or deposited with the United States Postal Service with sufficient postage to first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1462, Alexandria, VA 22313-1462 on the date shown below. The statement is to be made in the form of a letter to the USPTO or deposited with the United States Postal Service with sufficient postage to first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1462, Alexandria, VA 22313-1462 on the date shown below.</p>	
<p>ADDRESS: 000000: Commissioner for Patents, P.O. Box 1462, Alexandria, VA 22313-1462</p>	
<p>1/20 (mm) maximum in character for name, or 1/10 (mm) maximum in character for name</p>	
<p>PAGE 1150 RCVD AT 4/23/2004 11:50:10 AM [Eastern Daylight Time] SVR:USPTO-EFTRF-01 CHG:072925 CSC:7277333163 DURATION (mm:ss):04:12</p>	